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# Articles in Today's Clips

**Tuesday, September 23, 2008**

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Subject	Page
Abuse-neglect	2-6
Medicaid	7-8
State spending	9-11



# Prosecutors charge Midland man with abuse of 3-year-old

**Posted by The Saginaw News September 23, 2008 09:54AM**

MIDLAND -- A 32-year-old Midland man is in jail on charges that he severely beat a three-year-old boy.

Elijah Delong has bleeding on the brain, a lacerated liver and multiple fractured ribs, said Midland County Prosecutor Michael Carpenter.

Midland police arrested Alexis R. Clark-Parker, and prosecutors arraigned him Thursday. They charged him with first-degree child abuse on Sept. 15 at a home along Isabella in the city and is held on a \$1 million cash bond.

Police said Clark-Parker was watching the boy while his mother, Brandi Delong, recovered from an outpatient surgery.

Clark-Parker will have a preliminary examination within 14 days, Carpenter said.

Clark-Parker has two prior convictions for second-degree child abuse and has served time in prison. If convicted of first-degree child abuse, Clark-Parker could spend 15 years in prison. However, as a habitual third offender, he's facing up to 30 years, Carpenter said.

Elijah was listed in fair condition this morning at Covenant Hospital in Saginaw.

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## **Accused of kicking out a window, striking his child's face with his foot and broken glass**

September 22, 2008 - 8:29PM

VAN BUREN COUNTY, Mich. (NEWSCHANNEL 3) - The Van Buren County Sheriff's Department is reporting the arrest of a 48-year-old male who they have charged with domestic assault and interfering with a 911 call. Child abuse charges are also being sought against the individual.

The Sheriff's Department says that it responded to a 911 call from Columbia Township at the 46000 block of 8<sup>th</sup> Avenue. Once there, deputies were told that the suspect had assaulted his wife and 1 ½ year old daughter. The suspect had fled the scene prior to the arrival of the police.

The man's wife reported that he was possibly under the influence of drugs and behaving irrationally. She told police that she had locked her husband out of the house and attempted to call 911. While doing this, she said that her 1 ½ year old daughter was standing up against a window watching her father outside. The wife then said that her husband kicked out the window, striking the child in the face with his foot and glass.

The female stated that her husband then climbed though the broken window, assaulting her and grabbed the phone out of her hands.

The suspect informed deputies that he had been under the influence of Oxycodone at the time of the incident.

The Sheriff's Department says that the 1 ½ year old girl was transported to South Haven Hospital Emergency Department where she was treated for non-life threatening injuries. The child's mother sustained minor injuries from the assault and refused medical attention.

# WNEM.com

## Local Man Arrested On Child Abuse Charges

### *Alexis Clark-Parker Charged With First-Degree Child Abuse*

POSTED: 4:38 pm EDT September 22, 2008

UPDATED: 7:03 am EDT September 23, 2008

**MIDLAND, Mich.** -- Midland police have arrested a Mid-Michigan man after he was accused of slamming a 3-year-old boy into a wall.

The boy is hospitalized with bleeding on the brain and several broken bones. Alexis Clark-Parker, 32, was arraigned Thursday. He is charged with first-degree child abuse and is being held on a \$1 million cash bond.

Clark-Parker has two prior convictions for second-degree child abuse and has served prison time in Michigan.

According to family friend Chris Edwards, Clark-Parker slammed 3-year-old Elijah Delong against a wall Monday at a home on Isabella Road.

Clark-Parker was watching the boy while his mother, Brandi Delong, recovered from an outpatient surgery.

Elijah is listed in fair condition at Covenant Hospital in Saginaw.

It is unknown when Clark-Parker is expected in court for formal charges.

Stay with TV5 and WNEM.com as this story develops.

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# State failing to track missing sex offenders

By RYAN SECORD

Capital News Service

LANSING -- Bobby Lee Nelson, an Oxford, Mich. resident, was convicted of raping a teenager in 2000. After the conviction, he was placed on the state's sex offender registry and required to update his address with local authorities four times a year for 25 years.

But police have been unaware of his location since 2002.

Lapeer County has three sex offenders unaccounted for, all of them men convicted of having sex with minors. Two of those cases involved forced sexual acts, according to the sex offender registries Website.

The problem is that police aren't looking for these offenders.

According to Sgt. Zander Meulen of the State Police in Lapeer, sex offenders who abscond -- meaning they fail to check in with local law enforcement agencies -- are usually issued only a bench warrant by the local court, even in child rape cases.

Bench warrants order immediate arrest upon their next contact with police and are typically enforced when the subject is pulled over for a traffic offense, according to Meulen.

Instead of actively looking for absconders, police are waiting for them to come into contact again.

But what if the next contact these absconders have with police isn't a traffic violation, but another sex crime?

The absconder issue is a statewide problem according to Sgt. Michele Hernandez, the State Police's sex offender registry enforcement coordinator.

"There are currently 1,100 unaccounted-for sex offenders in Michigan. Money is part of the issue. There is not enough resources anywhere, not just State Police but every state agency," she said.

"If the county prosecutor views it as a low priority, so will the police," Hernandez said.

Russ Marlan, a Department of Corrections public information officer, said the recidivism rate for high risk offenders is 48 percent.

Statistically, then, more than 525 of the 1,100 unaccounted-for sex offenders will return to prison, although mostly for reasons other than committing new crimes.

Rep. Rick Jones, R-Oneida Township, is the former sheriff of Eaton County and is on the House Corrections and Sex Offender Registration Subcommittee.

He said police don't have the money form task forces to find absconders so the courts just issue bench warrants.

"When the Legislature was doing the State Police budget, I put in an amendment for \$1 million to pick up dangerous absconders, people who are wanted for sex acts. I feel we should go out and seek out pedophiles and get them off the streets," Jones said.

"In my experience in law enforcement, I've seen that pedophiles are never cured, and they need to be kept away from the rest of society."

His proposal passed the House but was reduced to \$10,000 in the Senate.

Rep. Andy Coulouris, D-Saginaw, agrees with Jones the barrier to tracking missing absconders is financial.

"The city of Saginaw, for example, had 150 officers seven years ago and now only 85," Coulouris said.

“In a perfect world, the police could go out looking for these absconders, but the reality in communities like Saginaw is the resources just aren’t there to accomplish that.”

A 2004 law requires the State Police to post pictures of the offenders on the registry’s public Web site. However, there are hundreds of offenders with no images posted, according to Hernandez.

Delonzo Satava Woods of Lapeer was convicted of having sex with a teenager, but his photo and address aren’t in his Web site profile.

That’s upsetting to victims, said Christy Garner, a sexual assault advocate at a Lapeer area women’s safe house.

“When I work with the victims directly, they feel the bench warrant policy doesn’t show any justice toward them. Their biggest issue is safety, and their chances of being re-victimized are really high,” she said.

Coulouris said that if there are currently 1,100 unaccounted-for sex offenders with the risk of victims being re-contacted by their attackers, then an incomplete registry being incomplete is dangerous and wrong.

“We will exercise our legislative oversight to find out why these photos are not online. Our legislative oversight would give us the ability to go after those who are not fulfilling their requirements to make sure the registry is up to date,” he said.

The Michigan Sex Offender Registry Act requires the state police to take the photos used on the registry Web site from Secretary of State files, said Hernandez.

“These pictures aren’t on the Web site because sometimes the offender does not have an ID. The Legislature doesn’t allow us to use mug shots, and of course there are always programming errors. The state police also have a lot of other priorities, we don’t have any staff dedicated to just that specific issue right now,” she said.

Garner said, “There should be tougher legislation on this issue. The police should be out there finding them when they don’t check in, not waiting for them to show up next time they break the law. But this all trickles down to law enforcement not being fully staffed, it’s a constant battle.”



## Neighborhood Income Linked to Delays in Seeking Treatment for MI

By Peggy Peck, Executive Editor, MedPage Today

Published: September 22, 2008

Reviewed by [Dori F. Zaleznik, MD](#); Associate Clinical Professor of Medicine, Harvard Medical School, Boston.

CHAPEL HILL, N.C., Sept. 22 -- People who live in low-income neighborhoods are more likely to delay seeking treatment for heart attacks than people who live in wealthier neighborhoods or have better insurance coverage than that offered by Medicaid, researchers here reported.

### Action Points

- Explain to interested patients that they should call 911 at the first sign of heart attack, including pressure, squeezing or pain in the center of the chest, pain spreading to shoulders, neck, or arm, lightheadedness, shortness of breath, nausea, increased or irregular heart rate, and/or feeling of impending doom.
- Explain to interested patients that the American College of Cardiology/American Heart Association recommend the opening of blocked arteries in less than 90 minutes of symptom onset.

Analysis of data from the Atherosclerosis Risk in Communities (ARIC) study found that living in a low-income neighborhood increased the odds of delaying hospital treatment by more than two hours, according to Randi E. Foraker, M.A., of the department of epidemiology at the University of North Carolina, Chapel Hill, and colleagues who reported the findings in the September 22 issue of *Archives of Internal Medicine*.

Moreover compared with patients covered by Medicare or other prepaid insurance plans, Medicaid patients were also more likely to delay treatment for two to 12 hours (OR 1.76, 95% CI 1.13 to 2.74) and for more than 12 hours (OR 1.87, 95% CI 1.10 to 3.19).

But patients with no insurance "were not likely to have a longer delay than patients with prepaid or prepaid and Medicare insurance."

Patients who arrived at the hospital less than two hours after symptom onset were "more likely to be male and white and to have arrived at the hospital by EMS than were those with longer delays," they wrote.

Timing of treatment in acute myocardial infarction is important because primary reperfusion is now considered the optimal treatment for ST-elevation myocardial infarctions (STEMI) and with a 90-minute golden window for preserving heart muscle. (See: [Paramedic Triage Reduces Time to Balloon with No Extra Risk](#) and [AHA: Door-to-Balloon Time Shortened by Simple Strategies](#))

The ARIC study is an ongoing community-based surveillance study that has been collecting data since 1987. Ms. Foraker's analysis was based on a retrospective review of hospital discharges for white and black acute MI patients in four study communities -- Forsyth County, North Carolina; Jackson, Mississippi; the northwest suburbs of Minneapolis, and Washington County, Maryland.

Data were collected from 9,700 patients treated from 1993 through 2002.

A third of the patients were women, 25% were black, and 42% arrived at the hospital in an ambulance.

Two-thirds of the patients had a history of hypertension, and a third had a history of hypertension and diabetes.

Among the findings:

- 94% of patients reported chest pain as a symptom
- 36% of patients arrived at the hospital in less than two hours of symptom onset
- 42% arrived within two to 12 hours
- 22% arrived 12 to 72 hours after symptom onset.
- Low income patients were more likely to live close to the hospital than persons with higher incomes, but still were more likely to have a long (more than 12 hours) or moderate (two hours to 12 hours) delay in seeking treatment.

The authors said the study was limited by the retrospective collection of data and the inability to "elucidate the possible processes" concerning the observed association between low-income neighborhoods and delay in seeking treatment.

The ARIC study is supported by the National Heart, Lung, and Blood Institute, the National Institutes of Health, and the National Research Service Award.

Ms. Foraker reported no financial disclosures.

**Primary source:** Archives of Internal Medicine

Source reference:

Foraker RE, et al. ["Neighborhood Income, Health Insurance, and Prehospital Delay for Myocardial Infarction The Artherosclerosis Risk in Communities Study"](#) *Arch Int Med* 2008; 168: 1874-1879.

**Related Article(s):**

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# MICHIGAN REPORT

The Capitol Record Since 1906

REPORT NO. 183, VOLUME 47-- MONDAY, SEPTEMBER 22 2008

## **DETROIT RENAISSANCE CALLS FOR MAJOR STRUCTURAL CHANGES TO SAVE MONEY**

Major changes in Michigan's corrections, Medicaid, teacher retirement and state worker health care system are essential to stave off a potentially devastating structural deficit that could near \$10 billion in just nine years, officials with Detroit Renaissance said Monday in releasing a series of proposals on the state budget.

Changes adopted a year ago during the budget crisis leading up to the 2007-08 fiscal year failed to address major structural changes the state needs, the [report](#) said. If adopted, the changes could save the state an estimated \$800 million a year and over 10 years help the state avoid a structural deficit that could reach as much as \$9.6 billion.

Changes to the corrections system alone could result in annual savings of \$45 million, the report said.

But a spokesperson for [Governor Jennifer Granholm](#) said the report raised many important questions, but most had been "asked and answered by our administration."

The report builds off the 2007 report that Ms. Granholm asked of top state leaders to help government restructure itself. That report, issued in the days just before Ms. Granholm called for a 2-cent sales tax on services (which later was turned into the income tax increase and surcharge on the Michigan Business Tax the Legislature adopted) called for the state to recognize that along with tax increases and spending cuts major structural changes would have to be adopted.

The Detroit Renaissance report said the findings and recommendations of that earlier report, *Michigan's Defining Moment*, were largely unaddressed.

"The need for fundamental change in the delivery of public services is even greater now" than it was in February 2007, the Detroit Renaissance report said.

"Recognizing the significant budget proportion represented by corrections, Medicaid, and public employee compensation and benefits, this report builds upon the recommendations of the (February 2007 report) and provides specific options for policymakers to consider - not for balancing next year's budget, but for changing Michigan's fiscal course toward sustainable prosperity for generations to come" the latest report said.

Corrections provides many of the greatest opportunities for long-term savings, the report said, because it has been one of the fastest growing areas of state spending over the last several decades. If changes are not adopted, the state's prison population could grow by another 10 percent in just four years, the report said.

The state has more prisoners locked up than the typical Great Lakes state, and locked up for a longer period of time, and spends more on them than other states, the report said.

Corrections costs have already been cited by both Ms. Granholm and legislative Republicans, but in different ways. Ms. Granholm has looked at controlling prison populations in part by releasing older, sicker inmates who are no longer considered a threat. Republicans have called for dealing with other costs such as medical and food services. The report says that if the state's sentencing guidelines allowed for prisoners to be incarcerated on the same basis as other states, that alone would save \$34,500 per prisoner on average.

And the report called for the state to find ways to minimize the number of prisoners serving past their earliest release date and ending prison terms for some non-violent offenses.

The report also called for the state to consider changing how prisoner food systems are managed, citing an audit released earlier in the year that contrasted Michigan's prison food system with that in Florida and Iowa. The findings of that audit were disputed by the Department of Corrections however, which said the Florida system has run into a number of prisoner complaints.

In terms of Medicaid savings, the report said the state has done a good job maximizing federal funds, so that Medicaid costs roughly the same amount of general funds now as it did when 500,000 fewer people were covered by Medicaid.

But the report did call for the state to cut back on some services now provided by Medicaid or limiting optional services and cutting back on payments to providers.

The state has done both cuts to providers and eliminated or limited some services, which has raised concerns and opposition, especially from medical providers who warned that fewer doctors and hospitals would care for Medicaid patients.

But the report also called for the state to better coordinate payments as well as promote healthier lifestyles by Medicaid recipients to help cut down on the costs of treating some chronic conditions. Senate Republicans have tried unsuccessfully for several years to implement such changes. The report did not estimate how much the state might save from Medicaid changes. But it did see big savings by changing how the state deals with worker health care and teacher retirement: nearly \$360 million with \$269 million coming from changes in worker health care and \$87 million in changing the public school employee pension system.

In terms of worker health care, the report said state workers pay a smaller portion of their health care premiums than do workers in other states. In Michigan workers paid an average of 5 percent of their premiums while workers in other states pay an average of 23 percent. There are really only two ways the state could save on the costs, the report said, either by cutting benefits or by increasing premiums. And if state workers paid the same average on their premiums as they do in other states, then Michigan might save anywhere from \$86 million to \$269 million. In terms of teacher retirement, the report proposed that new teachers become part of a defined contribution as opposed to the current defined benefit proposal. The state should also require standardization of benefits, directing that all plans set the same ages at when teachers could retire.

Liz Boyd, spokesperson to Ms. Granholm, said the administration had looked at most the issues raised by the report. State workers are now paying more for their health insurance than before, she said, and Ms. Granholm has said she open to a 401-k plan for teachers but implementing it could cost the state as well.

While released to the public on Monday, the report, developed largely by Public Sector Consultants with Detroit Renaissance, was forwarded last week to Ms. Granholm and to legislative leaders.



Tuesday, September 23, 2008

## Group calls for state to cut \$800M

**Mark Hornbeck / Detroit News Lansing Bureau**

Michigan government should slash inmate sentences, curb health care programs for the poor, and cut benefits for teachers and state workers in the interest of saving taxpayers \$800 million over the next decade, says a Detroit Renaissance report released Monday.

The state budget deficit will continue to spiral -- to nearly \$10 billion by 2017 -- unless spending reductions like these are enacted, according to the private, nonprofit leadership group.

"These actions are needed to restore the state's fiscal health over the next decade and lay the foundation for future economic prosperity," said Doug Rothwell, president of Detroit Renaissance.

Most of the proposed cuts have been debated in the state capital for years, but lawmakers and the governor have failed to strike agreement due to policy and political differences.

For example, Gov. Jennifer Granholm has pushed for allowing some nonviolent offenders and elderly inmates out of prison, but those changes have been opposed by Republican legislators who don't want to soften the state's stance on deterring crime and punishing offenders.

Some Republican lawmakers have sought reductions in Medicaid health care for the poor, but Granholm has opposed most of them saying the state should not cut programs for its most vulnerable citizens, especially during a down economy.

Liz Boyd, spokeswoman for Granholm, said of the report: "(It) raises questions that have been both asked and answered by the Granholm administration. We've proposed corrections reform. State employees and retirees are paying more for their health care. The governor has said she could support 401(k) plans for new teachers.

"And our Medicaid program is one of the most efficient in the nation, because over a million of our beneficiaries are in managed care."

State Sen. Nancy Cassis, R-Novi, said: "We have got to find savings and really begin to control spending if we are to set this economy back on the right track. I welcome suggestions from Detroit Renaissance and others. It's time now to go about cost containment in a practical way."

The 20-page report, submitted to the governor and legislative leaders, was written for Detroit Renaissance by Public Sector Consultants Inc., a nonpartisan public policy think tank based in Lansing.

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